MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)

SERIAL NO. FILING DATE

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT			*		* *		*		
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CLAIMS	20				<u> </u>	8.23 F C 7]	CLAIMS	L				_	

*MAY BE USED FOR ADDITIONAL CLAIMS OR ADMENDMENTS

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